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PLANT PATENT APPLICATION TRANSMITTAL

Attorney Docket No. Poulen012 First Named Inventor L. Pernille Olesen Title ROSE PLANT NAMED 'POULen012

(Only for new no	onprovisio	nal applications under 37 CFF	? 1.53(b))	Express	s Mail Label No.	<u> ev 3</u>	14 422	<u>464</u>			
Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231											
APPLICATION See MPEP chapter.	—	LEMENTS 600 concerning plant patent a	oplication cont	ents.	ACCOMPAN'	YING AP	PLICATIO	N PARTS			
2. Specificant	original, a t claims s	orm (e.g., PTO/SB/17) nd a duplicate for fee processing) mall entity status. See 37 CFR [Total Pages	1.27.	7. 8.	37 CER 3 73/b) Statement Power of						
(2 cop (preferred	ed - 37 CFR 1.163(b) nt set forth below) of the invention		ish Translation Document (if applicable)								
- Cross - Staten	es to Related Applications arding Fed sponsored R & D enus and species		10.	10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations							
- Variety - Backgr	Variety denomination Background of the Invention					11. Preliminary Amendment					
- Brief S - Brief D - Detaile	of the Invention of the Drawings cal Description	12.	12. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)								
- Claim (only one (1) permitted MPEP 1605) - Abstract of the Disclosure 4. Color drawing(s) [Total Sheets 4]					13. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
(2 copies required - 37 CFR 1.165(b)) 5. Oath or Declaration [Total Pages 2] 14.						Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form					
b. [] ¿	for continu	n a prior application (37 CFR 1 ation/divisional with Box 16 comple	.63(d)) eted)	15.	Other:						
i. [<u>ETION OF INVENTOR(S)</u> ned statement attached deletin	ıa	j			· · · · · · · · · · · · · · · · · · ·				
inventor(s) named in the prior application, Note: Please state the Latin name and var								and variety			
see 37 CFR 1.63(d)(2) and 1.33(b). denomination of the plant claimed in a separate sect of the specification.							arate section				
16. If a CONTINU	JING APP	PLICATION, check appropriate box	, and supply the re		•		amendment, or i	n an Application			
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. Continuation Divisional Continuation-in-part (CIP) of prior application No.:											
Prior application information: Examiner Group Art Unit:											
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or											
declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been											
inadvertently omitted from the submitted application parts.											
17. CORRESPONDENCE ADDRESS											
Custome	r Number or	Bar Code label (Insert Custor	ner No. or Attach	bar code l	abel here) or	☑ co	orrespondence add	dress below			
Name	Poulsen Roser Pacific, Inc.										
Address	620 South Front Street										
City Central Point			State	OR	12	Zip Code	97502	. – -			
COUNTRY USA Telephon				(541))245-8050	Fax	(541) 665-	-2252			
	<u></u>	Manage M. Ol.	1. 1		<u> </u>	1					
Name (Print/	Туре)	Mogens N. Olesen	HWH	Regis	stration No. (A	ttorney/Ag					
Signature		l				Da	te VM/1	uh5a0			

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PTO/SB/17 (01-03)
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	ed to respond to a collection of information unless it displays a valid OMB control number. Complete if Known								
iii F	┗▐	Applic	cation I	Numbe					
1	Ī	Filing Date							
		First Named Inventor		Invent	tor L. Pernille Olesen	L. Pernille Olesen			
Effectiv		Examiner Name			-				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1661			1661		
TOTAL A		Attorney Docket No. POULen012- APP							
METH	FEE CALCULATION (continued)								
✔ Check	3. ADDITIONAL FEES								
Deposit	Account:	_	Large Entity Small Entity						
Deposit	501828		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Account Number	301020		1051	130	2051	65 S	Surcharge - late filing fee or oath		
Deposit Account	Poulsen Roser Pacific		1052	50	2052		Surcharge - late provisional filing fee or cover sheet		
Name The Commiss	sioner is authorized to: (check al	l that apply)	1053	130	1053		Non-English specification		
	-	lit any overpayments		2,520	1812	-,	For filing a request for ex parte reexamination		
Charge any	y additional fee(s) during the pend	ency of this application	1804	920*	1804		Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				1,840*	1805		Requesting publication of SIR after Examiner action		
FEE CALCULATION				110	2251		Extension for reply within first month		
1. BASIC FILING FEE			1252	410	2252		Extension for reply within second month		
Large Entity S	Small Entity Fee Fee Fee Description	Fee Paid	1253	930	2253		Extension for reply within third month		
Code (\$)	Code (\$)	I CC F alu		1,450	2254		Extension for reply within fourth month		
1001 750	2001 375 Utility filing fee			1,970	2255		Extension for reply within fifth month		
1002 330	2002 165 Design filing fee		1401	320	2401		Notice of Appeal		
1003 520	2003 260 Plant filing fee	265.00	1402 1403	320 280	2402 2403		Filing a brief in support of an appeal Request for oral hearing		
1004 750 1005 160	2004 375 Reissue filing fe 2005 80 Provisional filing			1.510	1451		Petition to institute a public use proceeding		
1005 100	SUBTOTAL (1)		1452	110	2452		Petition to revive - unavoidable		
1		(\$) 265.00	1453	1,300	2453	650	Petition to revive - unintentional		
2. EXTRA	CLAIM FEES FOR UTILIT	Y AND REISSUE Fee from	1501	1,300	2501		Utility issue fee (or reissue)		
Tatal Claims	Extra Claims	below Fee Paid	1502	470	2502	235	Design issue fee		
Total Claims Independent	-20** = X X		1503	630	2503	315	Plant issue fee		
Claims Multiple Depe			1460	130	1460		Petitions to the Commissioner		
1	L		1807	50	1807		Processing fee under 37 CFR 1.17(q)		
Large Entity Fee Fee	Fee Fee Fee Descrip	tion	1806	180	1806		Submission of Information Disclosure Stmt		
Code (\$) 1202 18	Code (\$) 2202 9 Claims in exce	ss of 20	8021	40	8021	40 1	Recording each patent assignment per property (times number of properties)	40.00	
1202 18		aims in excess of 3	1809	750	2809		Filing a submission after final rejection (37 CFR 1.129(a))		
1203 280		dent claim, if not paid	1810	750	2810		For each additional invention to be		
1204 84	2204 42 ** Reissue inde	pendent claims				•	examined (37 CFR 1.129(b))	\vdash	
1205 18	over original 2205 9 ** Reissue clair	ns in excess of 20	1801 1802	750 900	2801 1802	375 900	Request for Continued Examination (RCE) Request for expedited examination		
1205 18	and over orig	inal patent					of a design application	 	
	/	1/ \	Other	fee (sp	ecity)			, I	

Signature Date 29 March 2004 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SUBTOTAL (2)

eareon

**or number previously paid, if greater, For Reissues,

Ken Ryn

SUBMITTED BY

Name (Print/Type)

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO**: Commissioner for Patents, Washington, DC 20231.

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Registration No.

SUBTOTAL (3)

(Complete (if applicable)

Telephone 541 245-8050

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